



Comparison of Treatment Options for Hip Dysplasia

What is Hip Dysplasia?

Hip dysplasia is an abnormal development and growth of the hip joint. Both hips can be affected but symptoms may be more severe on one side. It is manifested by varying degrees of laxity (looseness) of the hip joint with instability and malformation of the joint components. Arthritis, severe pain, and decreased mobility are long-term consequences. Various treatments are available

	Conservative (Nonsurgical) Treatment	Surgery A: Double or Triple Osteotomy (DPO/TPO)	Surgery B: Femoral Head Ostectomy (FHO)	Surgery C: Total Hip Replacement (THR)
What does it involve?	Weight optimization medication (NSAIDs), modified activity, physical therapy, joint treatments (oral supplements, joint injections), and/or acupuncture.	Pelvic bones are cut, and the hip socket is rotated to cover the ball of femur and make hip more stable.	Procedure removes the top “ball” part of the hip joint. Ball and socket boney joint becomes a soft tissue muscle joint.	Diseased joint is replaced with state-of-the-art surgical implants for a pain-free joint surface.
When is this approach appropriate for my pet?	At any age, when surgery isn’t indicated or possible.	6 – 10 months old (depending on breed). Joint anatomy must be near normal and joint must be free of evidence of arthritis.	At any age. This is a “salvage” procedure with no guarantee of a return to full normal function. Rehabilitation therapy is an essential part of recovery. Often considered a last resort.	When conservative therapy is no longer working or is a poor option due to the severity of the hip problem. Possible from 7-8 months old. For dogs 5.5lbs (2.5kg) - 170lbs (77kg) and cats.
What’s the goal of this treatment?	Manage symptoms to improve mobility, comfort and function. May not be fully effective. Arthritis will progress over time despite treatment.	Reduced hip laxity. Improves “fit” of bone of hip joint. Hopes to lessen progression of arthritis.	Hopes to decrease joint pain by removing the contact between the bones of the hip joint. Hip pain can persist despite surgery.	Provides a complete solution by eliminating pain and restoring full mobility. As in human orthopedics, this is the gold-standard.
What’s the risk of this approach?	Disease progression leading to chronic pain. Decreased joint function. Increasing lameness. Cost and risks associated with lifelong medication and adjunctive therapies.	Normal risk associated with surgery*. Failure to heal as expected. Progression of arthritis with return of hip pain.	Normal risk associated with surgery*. Persistent gait abnormality. Lameness. Reduced hip mobility. Shortening of the limb. Persistent hip pain.	Normal risk associated with surgery*. Possible femoral fracture or implant failure. Most complications can be successfully resolved.
What is the duration of this treatment?	Duration of pet’s lifetime.	Strictly limited exercise following surgery while bone heals, typically 6-8 weeks. Often both hips require surgery, staged procedures one after another.	Weight bearing and rehabilitation exercises are encouraged within days of surgery. Recovery to “best outcome” may take up to or beyond 12-16 weeks.	Strictly controlled activity for the initial 6 weeks followed by a gradual return to regular activities by 12-16 weeks.

*All surgical procedures carry some low risk for complications. These might include anesthesia risk, surgical infection, bone fractures, implant failures, soft tissue, and nerve injury. Many complications can be successfully resolved. Your pet’s surgeon will provide specific instructions on how best to manage your pet during the postoperative period. Careful adherence to postoperative instructions is essential for minimizing the risk of complications.